CHAPTER XV.—MEDICAL

205. *Duties of the Director of Public Health.*—The Director of Public Health shall be generally responsible, under the directions of the Commissioner, for relief measures in their sanitary aspect. He shall—

(*a*) on receipt of information from Government that scarcity or famine is imminent in any district in consultation with the Collector prepare and forward to the Surgeon General an estimate of the extra trained medical staff likely to be immediately required ;

(*b*) see that medical officers are appointed to famine relief works when such works are opened in any district ;

(*c*) from time to time, as scarcity or famine continues, ascertain in advance the probable requirements of each district and give the Surgeon General timely intimation of the same;

(*d*) subject to the provisions of sections 38 and 215, supervise the whole medical staff employed in relief operations, which shall in all professional matters be subordinate to him ;

(*e*) watch the general management of famine relief works, hospitals and poor-houses with reference to the health of the people, addressing the Collector on matters not directly connected with the medical and sanitary administration ;

(*f*) carefully scrutinize the mortality returns, both before and during scarcity or famine, for any indications of the approach or existence of scarcity or famine in any district or of defective relief measures ;

(*g*) on the outbreak of epidemic disease on scarcity or famine relief works or in villages assist the local officers by advice and by recommending to the Collector the employment of additional medical officers at the same time informing the Surgeon General of the probable number required ;

(*h*) draw up a standard scale for the medicines, instruments, stores, &c., which under section 216 are to be issued on the opening of any hospital; fix the standard up to which the supply is to be kept by indents on the Civil Surgeon under section 210; and inform the Medical Storekeeper on the imminence of scarcity or famine, and from time to time during its continuance, of estimated requirements;

(*i*) take prompt measures for complying with district requisitions for medicines, instruments and hospital appliances necessary for the treatment of the sick in famine camps and hospitals; such requisitions shall be prepared under the instructions and countersignature of the District Medical Officer or the Civil Surgeon ;

(*j*) issue general instructions in regard to hospital diets and the issue of extra food or drink for the various classes of patients ;

(*k*) submit to Government not later than the 20th of each month a statement in Form 8, showing the death-rates in the affected districts for the previous month ;

(*l*) submit to Government a monthly return in Form 37 of sick persons medically treated on relief works and in poor-houses ;

(*m*) keep the Collectors informed of his movements, as far as practicable, so that local officers may, whenever it is possible, be present at his inspection visits ;

(*n*) arrange for vaccination being carried on at the relief works and poor-houses in the same way as in villages.

206. *Duties of the Assistant Directors of Public Health.*—The Assistant Directors of Public Health shall, in their respective circles, act under the orders and control of the Director of Public Health for the performance of the above duties.

207. *Duties of the Surgeon General.*—The principal duty of the Surgeon General with the Government of Bombay in connection with scarcity or famine

relief shall be to arrange for the prompt supply of the trained medical establishment required for relief operations of every kind. He shall—

(*a*) at all times maintain, and cause all Civil Surgeons to maintain, lists of qualified candidates for employment as medical officers in time of scarcity or famine noting the vernaculars spoken by each;

(*b*) take active steps to supply, from his own lists or from that of the Civil Surgeon of the district, the medical officers of all grades required for any district, immediately on receipt of requisitions under section 209;

(*c*) have power to engage medical subordinates for scarcity or famine duty on such pay and allowances, not exceeding Rs. 400 a month, as he may specially determine in each case.

208. *Arrangements for the entertainment of medical officers.*—Should the establishment at the disposal of the Surgeon General be inadequate to meet all requisitions, he shall apply to Government for such additional assistance from the Army Deparment as may be required. Failing a sufficiency of aid from this source, he shall, with the sanction of Government, entertain temporarily such qualified medical officers as may be available from the classes of pensioned medical officers of the Warrant and Hospital Assistant grades and Indian doctors; and should local sources fail to supply the required number of medical officers he shall promptly inform Government in order that the needful supply of superior officers and subordinates may be obtained from other provinces.

209. *Posting of medical officers to famine duty.*—In posting medical officers to famine duty the following procedure shall be observed:—

(*a*) When a medical officer is required for outdoor duties during scarcity or famine for a hospital on a famine relief work or in a poor-house the Collector shall make a requisition, by telegram, if necessary, on the Surgeon General, stating the nature of the work and the probable numbers to be attended in poor-houses and send a copy of the requisition at the same time to the Director of Public Health. The Surgeon General shall comply with such requisitions to the fullest extent possible, having regard to the general estimates received from the Director of Public Health and exercising his discretion as to the relative urgency of the various requisitions received, and shall keep the Director of Public Health promptly informed of all postings made by him.

(*b*) As far as possible, only men with a knowledge of the local vernacular shall be posted to a district.

(*c*) In complying with requisitions under clause (*a*) the Surgeon General shall ascertain, ordinarily by telegram, whether the Civil Surgeon of the district has on his list any man available; if he has, the Surgeon General shall ordinarily appoint a man from that list; if he has not, the Surgeon General shall appoint a man from his own lists.

(*d*) In appointing a man to any district the Surgeon General shall not appoint him to any specific post in that district, but shall direct him to proceed to the head-quarters of the district; and the Collector shall appoint him to a specific post in the district informing the Civil Surgeon at once of such appointment.

210. *Duties of the Civil Surgeon.*—The Civil Surgeon shall, as far as scarcity or famine relief works go, be under the general orders of the Collector. He shall—

(I) When scarcity conditions have been declared to exist in a district, exercise supervision over the medical and sanitary arrangements on scarcity works and in relief poor-houses, hospitals, orphanages, &c., in the district.

(II) When famine conditions have been declared to exist in a district—

(*a*) be the depôt-keeper for medicines, instruments, stores, &c., under the general orders of the Director of Public Health;

(*b*) comply with all indents for medicines, instruments, stores, &c., with the greatest promptitude, provided that the fixed standard is not departed from, and see that the supply with each medical officer on works, poor-houses, &c., is kept up to the fixed standard;

(*c*) arrange to send on medical officers deputed to famine duty, as they arrive at head-quarters, to the posts to which they have been appointed by the Collector and see that no such officer leaves head-quarters without a proper supply of medicines, &c. ;

(*d*) ascertain from the Executive Engineer whether hospital accommodation on any famine relief works to which, under the Collector's orders, it is intended to post a medical officer is ready and, if not, the date on which it is expected to be ready ;

(*e*) carefully and scientifically study the peculiar phases of disease prevalent among the famine-stricken, and make *post-mortem* examinations as opportunity offers, inasmuch as this important work cannot be systematically done by the other medical officers on famine duty;

(*f*) when not performing the duties of District Medical Officer, remain at his head-quarters as a rule, and exercise supervison over the relief poor-houses, hospitals, orphanages, &c., at or near the head-quarter station.

211. *Direct requisitions on Medical Storekeeper in urgent cases.*—In order that there may be no delay in the supply of medicines, the Civil Surgeon is authorized to make requisitions direct on the Medical Storekeeper. The latter officer shall be informed by the Director of Public Health of the imminence of scarcity or famine and, from time to time during its continuance, of estimated requirements.

212. *Appointment of District Medical Officer.*—When famine conditions are declared to exist in a district a commissioned or other duly qualified medical officer may be appointed to it with the designation of District Medical Officer; in any district to which no such officer is appointed the duties assigned by the Code to the District Medical Officer shall, as far as possible, be performed by the Civil Surgeon.

213. *Duties of District Medical Officer.*—The duties of the District Medical Officer shall be—

(*a*) subject to the provisions of sections 38 and 215, to take general charge of all medical and sanitary measures connected with relief operations outside the head-quarter station and supervise the medical establishment employed thereon which shall in all professional matters be in direct subordination to him ;

(*b*) to move about the district actively, inspecting the sanitary condition of relief works and villages and the physical condition of the people;

(*c*) to give careful attention to the birth and death registers, and periodically to inspect the recipients of gratuitous relief;

(*d*) to watch the state of the water-supply, especially that allotted to the low-caste people, and see that the instructions laid down regarding the disinfection of wells are understood by those whose duty it is to attend to them ;

(*e*) to see that there is a proper supply of fever, influenza and cholera medicines with the village officers ;

(*f*) to supervise the work of the subordinate medical officers appointed to famine relief works and hospitals, and instruct them in their duties ;

(*g*) to scrutinize the accounts of both hospitals and kitchens on all works and see that the authorized diets are issued.

214. *Powers of District Medical Officer and Director of Public Health as regards medical subordinates.*—The District Medical Officer shall have power to deal with professional misconduct or inefficiency on the part of any medical subordinate on the permanent establishment deputed for famine duty by suspending him from duty and reporting the circumstances, with the explanation of the subordinate, for the orders of the Director of Public Health, who shall have power to inflict any punishment short of dismissal, reporting it for record in the Surgeon General's office. In the case of professional misconduct or inefficiency on the part of temporary medical subordinates, the District Medical

Officer shall have power to inflict any punishment short of dismissal; and the Director of Public Health shall have power to dismiss, any order of dismissal being reported to the Surgeon General.

215. *Subordination of medical officers on public works to Executive Engineers.*—In all except professional matters, the Collector shall have complete disciplinary control over medical officers posted elsewhere than on Public Works Department scarcity or relief works, and subject to section 38 the Executive Engineer shall have such control over medical officers posted on such works. In case of misconduct or inefficiency in any non-professional matter, the Collector or Executive Engineer shall proceed in the manner laid down for the District Medical Officer in section 214. The Collector shall have the power of transferring any medical officer from and to any post in the district, informing the Executive Engineer, the District Medical Officer, the Civil Surgeon and the Director of Public Health of all such transfers.

216. *Medical officers in charge of camp hospitals.*—A medical officer shall be appointed to the subordinate charge of the hospital which shall be attached to each famine relief work, being given the assistance of such trained subordinates as the Director of Public Health may consider necessary. He shall proceed to his charge fully equipped with medicines, instruments, stores, &c., on the scale laid down by the Director of Public Health.

217. *Duties of medical officers in hospitals on famine relief work.*—The following duties shall be attended to by the medical officer in connection with hospitals on famine relief works :—

(*a*) He shall keep up his supply of medicines, instruments, stores, disinfectants, medical comforts, &c., to the standard fixed for each hospital by the Director of Public Health.

(*b*) He shall indent from time to time on the Charge Officer for such supplies of hospital clothing, blankets, cots, mats, cooking pots, &c., as may be required for the hospital.

(*c*) He shall also indent on the Charge Officer for firewood, grain, oil, country liquor and other articles of diet and stimulants as required for the hospital patients, keeping a careful record of daily consumption.

(*d*) He shall superintend the cooking of the food and the issue thereof in accordance with the prescribed diet scales.

(*e*) He shall immediately report any outbreak of cholera or other epidemic disease to the above-named officers and to the District Medical officer, or Civil Surgeon.

(*f*) He shall refer all points of doubt or difficulty, not of a professional or technical nature, which cannot be settled by the Charge Officer, to the Executive Engineer, through the Charge Officer, for orders.

(*g*) He shall keep a hospital visitors' book and forward extracts therefrom to the Executive Engineer once a week. The District Medical Officer or Civil Surgeon shall examine this book on his visits to the charge and record such observations thereon as may be required after any investigation that he may deem necessary.

218. *Duties of medical officer on famine relief works.*—The medical officer shall attend to the following duties on famine relief works : —

(*h*) He shall make a daily inspection of the sanitary arrangements, burial and burning grounds, camps and water-supply, and shall carry out the disinfection of wells in accordance with paragraph 22 of Appendix V.

(*i*) He shall make a daily inspection of the dependents in the kitchen, prescribing special diet for the emaciated and sending to hospital any person in need of medical attendance.

(*j*) He shall make a periodical inspection of all persons on the work, with special attention to new-comers, weakly gangs and nursing mothers, sending to hospital any person who from extreme emaciation or from sickness is in need of medical attendance.

(*k*) He shall make a periodical inspection of the food offered for sale at the camp.

(*l*) He shall arrange for the detection of the first cases of infectious and contagious disease and for the adoption of measures to prevent their spreading.

(*m*) He shall arrange for the distribution of quinine on the works to prevent malarial fever and the supply of anti-scorbutics on the appearance of scurvy.

(*n*) He shall report immediately to the Charge Officer all defects noticed by him in inspections made under clauses (*h*) and (*k*), the names of dependents in the kitchen over ten years of age, whom he considers fitted for light work, and the names of those inspected under clause (*j*) for whom he thinks lighter tasking or gratuitous relief, with or without special diet, is required. It shall be the duty of the Charge Officer to take action at once on the reports of the medical officer under this clause.

(*o*) It shall be the duty of the Charge Officer to arrange for all officers on the work to assist the medical officer in the discharge of the duties imposed on him by clauses (*l*) and (*m*).

(*p*) It shall be the duty of the medical officer to assist the Charge Officer in classing the applicants for admission under section 95, because the Charge Officer needs expert advice as to ability for work of those in poor condition and as to the ages of children.

219. *Statements to be kept by medical officers.*—The following statements shall be kept by the medical officers in charge of hospitals on famine relief works and poor-houses:—

(*a*) nominal registers of indoor and outdoor patients in Form 38;

(*b*) returns of the rations given to indoor patients in Form 39;

(*c*) a diet register in Form 22;

(*d*) a stock register in Form 23;

(*e*) a weekly diary in Form 40;

(*f*) a weekly return of patients in relief work and poor-house hospitals in Form 41, to be forwarded every Saturday evening to the Charge Officer, Executive Engineer, District Medical Officer and Director of Public Health.

CHAPTER XVI.—Cattle and Fodder

220. *Measures to be taken in event of fodder famine.*—In the event of a fodder famine, strenuous endeavours shall be made to save at least the valuable cattle. The measures most likely to be successful are—

(*a*) the stimulation of the growth of fodder crops during the period of distress, especially by the grant of loans;

(*b*) the opening of Government forests to grazing;

(*c*) the importation of fodder and the grant of loans to purchase it;

(*d*) the preservation of cattle in camps;

(*e*) the encouragement of the use of emergency fodder such as cactus.

221. *Growing of fodder crops.*—Liberal takavi loans shall be given to cultivators for the construction of temporary wells to grow fodder crops; waste land in river beds and elsewhere may be let temporarily at a nominal rent for the production of fodder crops; and the Collector may, at his discretion, give an assurance that no special water rate will be levied for irrigation from rivers or other occasional sources of water-supply and that no fodder crop will be attached for the payment of land revenue. In tracts irrigated by canals the Collector, in consultation with the canal officers, may take such measures as may seem advisable for the growth of fodder and for increasing the growth of grass.